REPORT OF RECEIPTS AND EXPENDITURES (CFA-4) OF A POLITICAL COMMITTEE **Summary Sheet** State Form 4606 (R13/11-05) FILE NUMBER Indiana Election commission (IC 3-9-5-14) 5419 INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on TOTAL PAGES IN ENTIRE CFA-4 REPORT this form. For assistance in completing this form, see instructions on the 6 reverse side. IS THIS AN AMENDMENT? Yes X No COMMITTEE INFORMATION Check if this is a new name 1. Full name of committee (as on Statement of Organization) Hamilton County Democratic Party Central Committee 2. Acronym or abbreviated name, if any 3. Committee telephone number (317) 522-1669 4. Mailing address (address where all campaign finance correspondence is received Check if this is a new address 5. City, state, ZIP code 6. Party affiliation (if applicable) Noblesville IN 46060 Democratic CANDIDATE INFORMATION (For Candidate's Committee Only) 8. Party affiliation or if independent 7. Full name of candidate (include any nickname) Democratic 9. Office sought (include district number, if any. Not required for exploratory committee.) 10. County of residence TYPE OF REPORT CONVENTION CANDIDATES ONLY 12. Check one: 11. Pre-Convention PreElect Post-Convention COLUMN A COLUMN B 12. Reporting period: This Period Year to Date Through: 10/10/2008 From: 04/12/2008 13. Cash on hand and investments at the beginning of this reporting period. 6,137.65 14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS (Note: These amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Itemized (use Schedule A) 6.604.17 15b. Uniternized 6,872.73 SUBTOTAL 15c. Add lines 15a, and 15b in both columns 13,476,90 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL 19,614,55 EXPENDITURES (Note: These amounts include in-kind expenditures and loan repayments.) 8,935,18 17a, Itemized (use Schedule B) (Public Question; use Schedule C) 17b. Uniternized 5.367.63 14,302.81 17c. Add lines 17a and 17b in both columns SUBTOTAL 18. Cash on hand and investments at close of this reporting period(subtract 17c from 16 in both columns) TOTAL 5,311.74 Debts OWED BY the committee (use Schedule D) 0.00 20. Debts OWED TO the committee (use Schedule E) 0.00 CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT, TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS Signature on File Date Reasure

WARNING: Any information contained in this report may not be copied for sale or used for any commercial purpose. (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Class D Felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B Misdemeanor (IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4-16, 3-9-4-17, 3-9-4-18.)

FOR OFFICE USE ONLY

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REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4806 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on TTEM 15e, of the Summary Sheet. All cumulative contributions from individuals/OVER \$100 per contribution, within a calendar year MUST be temized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, relating or deposit, proceeds from sales, interest or other income/DVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

FILE NUMBER	T
5419	
Page 1 of 2	

	CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1	Douglas DeJarnatt 823 Pebble Brook Place Noblesville IN 46062	Contribution: Direct	100.00	500.00	06/17/2008
ontr	ributor's Occupation (if required): Retired				Doug DeJarnatt
2	Mark Shoup 1301 Edinburgh Dr Carmel IN 46033	Contribution: Direct	250.00	250.00	04/25/2008
ontr	ibutor's Occupation (if required):				Treasurer
3	Mark Shoup 1301 Edinburgh Dr Carmel IN 46033	Contribution: Direct	100.00	350.00	07/16/2008
ontr	ibutor's Occupation (if required):				Treasurer
4	Mary Ray 11433 Timberlake Lane Fishers IN 46038	Contribution: Direct	253.00	253.00	04/24/2008
ontr	ibutor's Occupation (if required): Retired				Treasurer
5	Mary Ray 11433 Timberlake Lane Fishers IN 46038	Contribution: Direct	75.00	328.00	05/29/2008
ontr	ibutor's Occupation (if required): Retired				Treasurer
			\$ 778.00		
	TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY 5a of the Summary Sheet)	\$		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4506 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15s, of the Summary Sheet. All cumulative centributions from individuals OVER \$100 per contribution, within a calendar year MUST be femiced on this schedule (over \$200, if regular party committee). All cumulative excepts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income;DVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributors during the calendar year. Otherwise, this is optional.

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

FILE NUMBER	
5419	
Page 2 of 2	

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS		TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A	COLUMN B CUMULATIVE	DATE RECEIVE	
	(street, number, city, state ZIP code)	OR OTHER RECEIPT	PERIOD	YEAR-TO-DATE	RECEIVED BY	
6	Mary Ray 11433 Timberlake Lane Fishers IN 46038	Contribution: Direct	25.00	353.00	07/13/2008	
ontr	ibutor's Occupation (if required): Retired				Doug DeJarnatt	
7	Rusty Skoog 5764 Coopers Hawk Dr Carmel IN 46033	Contribution: Direct	76.17	276.17	05/08/2008	
ontr	ibutor's Occupation (if required): Self-employed				Treasurer	
8	Rusty Skoog 5764 Coopers Hawk Dr Carmel IN 46033	Contribution: Direct	200.00	200.00	05/18/2008	
ontr	ibutor's Occupation (if required): Self-employed				Treasurer	
9	Susan Barta 11206 Garrick St Fishers IN 46038	Contribution: Direct	75.00	463.10	05/16/2008	
ontr	ibutor's Occupation (if required): Pastor				Treasurer	
	SUB TOTAL	THIS PAGE OF SCHEDULE A	\$ 376.17	KS ASSAULT		
	TOTAL OF ALL PAGES OF SCHEDULE	A ON THE LAST PAGE ONLY 5a of the Summary Sheet)	\$ 1,154.17			



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR **ORGANIZATIONS** Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly in BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 153 of the Summany Sheet. All cumulative onotifications from babor organizations/OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as boan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be gamized on this schedule (over \$200 if regular party committee).

FILE NUMBER
5419
Page 1 of 1

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
1	American Federation of Government Employees 80 F Street N.W. Washington D. 20001	Contribution: Direct	400.00	400.00	04/24/2008
					Doug DeJarnatt
2	I.B.E.W Educational Committee 900 Seventh Street N.W. Washington DC 20001	Contribution: Direct	100.00	100.00	04/24/2008
					Doug DeJarnatt
3	I.B.E.W Educational Committee 900 Seventh Street N.W. Washington DC 20001	Contribution: Direct	250.00	350.00	04/24/2008
					Doug DeJarnatt
	SUB TOTAL	THIS PAGE OF SCHEDULE A	\$ 750.00	No.	PRINT
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM 15	A ON THE LAST PAGE ONLY 5a of the Summary Sheet)	\$ 750.00		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE Please type or print legibly IN BLACK INK all information on this schedule, for assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM15s of the Summary Sheet. All cumulative contributions from other entities/OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers—in and in-kind contributions regardless of the amount from candidate's, legislative caucus, and regular party committee). The interest of the income/OVER \$100 per contribution, within a calendar year, MUST be itemized on this schedule.

FILE NUMBER	
5419	
Page 1 of 1	

	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	RECEIVED BY
1	Committee to Retain Judge Pylitt 12999 Regent Circle Carmel IN 46032	Contribution: Direct	200.00	600.00	05/27/2008
					Doug DeJarnatt
2	Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061	Contribution: In-Kind Office Space	1,500.00	1,500.00	08/01/2008
					Doug DeJarnatt
3	Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061	Contribution: In-Kind Office Space	1,500.00	3,000.00	09/01/2008
					Doug DeJarnatt
4	Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061	Contribution: In-Kind Office Space	1,500.00	4,500.00	10/01/2008
					Doug DeJarnatt
	SUB TOTAL	THIS PAGE OF SCHEDULE A	\$ 4,700.00		
	TOTAL OF ALL PAGES OF SCHEDULE (Enter total on ITEM 1	A ON THE LAST PAGE ONLY 5a of the Summary Sheet)	\$ 4,700.00		



REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE

(CFA-4 SCHEDULE B) Itemized Expenditures

State Form 4606 (R13/11-05) Indiana Election commission (IC 3-9-5-14)

INSTRUCTIONS: Pieces type or print legibly IN BLACK INK all information on this form. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditurestotated on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipiers, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees (such as transfers-out from candidate, legislative caucus, political action, or regular party committees). MUST be itemized on this schedule.

FILE NUMBER	100
5419	
Page 1 of 1	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	and	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITUR
Code: Operations 1 Hassan "Rocky" Shanehsaz DBA Shane		In-Kind	1,500.00	1,500.00	08/01/2008
PO Box 995 Noblesville IN 46061		Purpose: Office Space			
Code: Operations 2 Hassan "Rocky" Shanehsaz DBA Shane		In-Kind	1,500.00	3,000.00	09/01/2008
LLC PO Box 995 Noblesville IN 46061		Purpose: Office Space			
Code: Operations		In-Kind	1,500.00	4,500.00	10/01/2008
3 Hassan "Rocky" Shanehsaz DBA Shane LLC PO Box 995 Noblesville IN 46061		Purpose: Office Space			
Code: Fundraising 4 The Fountains Banquet and Conference Center 502 East Carmel Drive		Direct Purpose: Banquet Facility Rental	3,727.18	4,227.18	04/29/2008
Carmel IN 46032		Kentai			
Code: Operations 5 West Bend Mutual Insurance Company 1900 S. 18th St		Direct	624.00	624.00	05/19/2008
West Bend WI 53095		Purpose: Insurance			
Code: Operations		Direct	84.00	708.00	07/21/2008
6 West Bend Mutual Insurance Company 1900 S. 18th St West Bend WI 53095		Purpose: Insurance			
	SUB TOTAL THIS	PAGE OF SCHEDULE B	\$ 8,935.18	of a straight	
TOTAL OF	ALL PAGES OF SCHEDULE B ON	THE LAST PAGE ONLY	\$ 8,935.18		